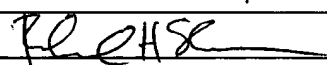

 <h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	10/714,156	
	Filing Date	November 14, 2003	
	First Named Inventor	Kirschner, Mitchell I.	
	Group Art Unit	1616	
	Examiner Name	Choi, Frank I.	
Total Number of Pages in This Submission	20	Attorney Docket Number	718689.4

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below); return postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks:	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Richard H. Shear, Reg. No. 26,583 Blackwell Sanders Peper Martin LLP
Signature	
Date	9/10/2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as Express Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Express Mail Label No.: EV390579779US			
Typed or printed name	Jennifer Christopher		
Signature		Date	9/10/04



9/13/04

1FW

PATENT
718689.4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Kirschner, Mitchell I.	:	Examiner: Choi, Frank I.
	:	
Serial No.: 10/714,156	:	Group Art Unit: 1616
	:	
Filed: November 14, 2003	:	Attorney Docket No.: 718689.4
	:	
For: NUTRITIONAL FORMULATIONS	:	Customer No.: 027128
	:	
Last Office Action: June 17, 2004	:	Confirmation No.: 2373

AMENDMENT A

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 17, 2004, please amend the above-identified application in accordance with the amendments and remarks as set forth herein.

Amendments to the Claims are reflected in the listing of claims which begin on page 2 of this document.

Remarks/Arguments begin on page 13 of this document.